

# A.S. AUTOMOTIVE, INC.

14088 S.W. 139 COURT  
 MIAMI, FL 33186  
 (305) 252-1107  
 MVR 94101788 MV-06912



omarsix@hotmail.com 023200

QUANTITY	PART NUMBER AND DESCRIPTION	UNIT PRICE	EXTEND
2	Front Shock Absorbers	Inc 100.00	
2	front Brake Rotors	ca 120.00	
	front Brake Pads	WSP 45.00	
2	Grease Seals	TPH 8.00	
	Brake fluid		6.00
	Rear diff. Pinion Seal	TPH 19.90	
	Fuel filter	n 10.00	
8	#1 Spark Plugs (AcDel)	n 52.00	
	Evap Solenoid	NP 45.10	
	Gear Oil		18.00
	ATF		28.00



IN DATE 11/03/14 ODOMETER 76821 OUT DATE / / ODOMETER

Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Proposed Completion Date: \_\_\_\_\_  
**Intended Payment Method**  
 CASH  CHECK  CREDIT CARD   
 #1 \_\_\_\_\_  
 #2 \_\_\_\_\_  

#	DESCRIPTION	LABOR
	LUBE	<input type="checkbox"/>
	CHANGE OIL	<input type="checkbox"/>
	FLUSH TRANS DIFF	<input type="checkbox"/>

DESCRIPTION OF WORK	LABOR
1 Replace differential Pinion Seal & differential fluid	98.00
Replace all Spark Plugs	90.00
2 Pack front wheel Bearings, Install new Rotors, Seals & Pads, Service & Adjust Rear Brakes.	140.00
3 Replace both Shock Absorbers	52.00
Align front End.	39.95
4 Replace fuel filter	30.00
Balance & Rotate tires	40.00
Repair transmission leak, Install new Seal.	110.00
5 Replace Evap Solenoid, Install new Hose	52.00
Lubricate the chassis, check all fluid level	NIC

CHECK ONE  
 ESTIMATE  
 INVOICE

**TOTAL PARTS** → 452.00  
 SUBLET REPAIRS

**TOTAL SUBLET REPAIRS** →

month/ mile warranty  
 on all parts and labor unless otherwise specified.

TECHNICIAN SIGNATURE X \_\_\_\_\_ CERT # JS

REVISSED ESTIMATE \$ \_\_\_\_\_

INCLUDE IN ESTIMATE \$

**PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:**

I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED \$100.

I REQUEST A WRITTEN ESTIMATE.

I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$\_\_\_\_\_. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.

I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNED \_\_\_\_\_ DATE 11/03/14

LABOR CHARGES BASED ON:  
 FLAT RATE \_\_\_\_\_  
 HOURLY RATE \_\_\_\_\_  
 BOTH ABOVE \_\_\_\_\_  
 ESTIMATE/DIAGNOSTIC FEE: \$ \_\_\_\_\_  
 CHARGE FOR DISASSEMBLY AND/OR REASSEMBLY \$ \_\_\_\_\_  
 WE CANNOT REASSEMBLE: \_\_\_\_\_  
 SAVE OLD PARTS  YES  NO (Core may apply)

ESTIMATED COST OF REPAIR \$ \_\_\_\_\_ X

REVISSED ESTIMATE \$ \_\_\_\_\_ X

TOTAL LABOR 651.95  
 TOTAL PARTS 452.00  
 SUBLET REPAIRS  
 FEES 20.00  
 ESTIMATE CHARGE  
 GAS & OIL  
 SUB-TOTAL 1123.95  
 TAX 78.67  
**TOTAL 1202.62**

(\*\*FS403.7185) FL BATT DISPOSAL \$ \_\_\_\_\_  
 (\*\*FS403.718) FL TIRE DISPOSAL \$ \_\_\_\_\_  
 DAILY CHARGE FOR STORAGE AFTER 3 WORKING DAYS AFTER CUSTOMER NOTIFIED \$ \_\_\_\_\_  
 ESTIMATE GOOD FOR 30 DAYS. I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the vehicle herein described for the purpose of testing and/or inspection. If there is a dispute over the final bill, the customer may bond the amount with your local clerk of the court, per FS 559.917. Failure to bond/pay the bill, may lead to implementation of FS 713.585; lien law. Repair shop will not be held responsible for loss or damage to the vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control. If it becomes necessary for you to employ a collection agency and/or an attorney to collect this account, I the undersigned agree to pay all court costs plus a reasonable attorney's fee.

HAZARDOUS WASTE \$ 5.00  
 SHOP SUPPLIES \$ 15.00  
 ENVIRO CHARGE \$ \_\_\_\_\_

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The limited warranties appearing on the parts listed hereon are those which may be offered by the manufacturer. We hereby expressly disclaim all warranties, either expressed or implied, including any implied warranties of merchantability or fitness for a particular purpose and neither assume, nor authorize any person to assume, for the company any liability in connection with the sale of the parts and/or service. Buyers should be entitled to recover from the company any consequential damages, to property, damages for loss of use, loss of profits, or any other incidental damages.

A-N-C FL

# A.S. AUTOMOTIVE, INC.

14088 S.W. 139 COURT  
 MIAMI, FL 33186  
 (305) 252-1107  
 MVR 94101788 MV 06912



023480

Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Proposed Completion Date: \_\_\_\_\_

QUANTITY	PART NUMBER AND DESCRIPTION	UNIT PRICE	EXTEND
	Rear Air Shocks #12	140.00	
3	Can High Temp Paint	24.00	



VIN: 1G4BR82P1TR419817  
 IN DATE: 01/6/15 ODOMETER: 77867 OUT DATE: / / ODOMETER: / /  
 Description of Work: Apply under coating to the car (P&L) 400.00  
 2 Brush the Exhaust Muffler & Pipe, Paint with high Temp Paint. 55.00  
 3 Service Rear Brake, Adjust the Shoes & Parking Brakes 90.00  
 4 Install new Air Shock in the Back. 110.00  
 5 Replace Transmission Shifter Seal NIC

*Paint*

ADDITIONAL PARTS ON BACK

CHECK ONE  
 ESTIMATE  
 INVOICE  
 TOTAL PARTS → 164.00  
 SUBLET REPAIRS  
 TOTAL SUBLET REPAIRS →

month/ mile warranty on all parts and labor unless otherwise specified.  
 TECHNICIAN SIGNATURE: X CERT. # GR  
 INCLUDE IN ESTIMATE \$

**PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:**

- I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED \$100.
- I REQUEST A WRITTEN ESTIMATE.
- I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$\_\_\_\_\_ THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.
- I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNED: *[Signature]* DATE: \_\_\_\_\_

LABOR CHARGES BASED ON:  
 FLAT RATE \_\_\_\_\_  
 HOURLY RATE \_\_\_\_\_  
 BOTH ABOVE \_\_\_\_\_  
 ESTIMATE/DIAGNOSTIC FEE: \$ \_\_\_\_\_  
 CHARGE FOR DISASSEMBLY AND/OR REASSEMBLY \$ \_\_\_\_\_  
 WE CANNOT REASSEMBLE: \_\_\_\_\_  
 SAVE OLD PARTS  YES  NO (Core may apply)

ESTIMATED COST OF REPAIR \$ \_\_\_\_\_ X  
 REVISED ESTIMATE \$ \_\_\_\_\_ X  
 (\*\*FS403.7185) FL BATT DISPOSAL \$ \_\_\_\_\_  
 (\*\*FS403.718) FL TIRE DISPOSAL \$ \_\_\_\_\_  
 DAILY CHARGE FOR STORAGE AFTER 3 WORKING DAYS AFTER CUSTOMER NOTIFIED \$ \_\_\_\_\_  
 ESTIMATE GOOD FOR 30 DAYS. I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the vehicle herein described for the purpose of testing and/or inspection. If there is a dispute over the final bill, the customer may bond the amount with your local clerk of the court, per FS 559.917. Failure to bond/pay the bill, may lead to implementation of FS 713.585; lien law. Repair shop will not be held responsible for loss or damage to the vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control. If it becomes necessary for you to employ a collection agency and/or an attorney to collect this account, I the undersigned agree to pay all court costs plus a reasonable attorney's fee.

TOTAL LABOR	655.00
TOTAL PARTS	164.00
SUBLET REPAIRS	
FEES	15.00
ESTIMATE CHARGE	
GAS & OIL	
SUB-TOTAL	834.00
TAX	58.38
<b>TOTAL</b>	<b>892.38</b>

# A.S. AUTOMOTIVE, INC.

14088 S.W. 139 COURT  
 MIAMI, FL 33186  
 (305) 252-1107  
 MVR 94101788 MV-06912



024688

Date: 02/04/16 Time: \_\_\_\_\_  
 Proposed Completion Date: \_\_\_\_\_

Intended Payment Method

QUANTITY	PART NUMBER AND DESCRIPTION	UNIT PRICE	EXTEND
2	Inner tie rod end	45.90	
2	Outer tie rod end	45.90	
2	Sway bar end link	18.50	
	Idler Arm	49.95	
	Oil Pan Gasket Set	55.00	
2	Oil Filter housing O'ring	8.00	
1 qt	mob. oil	8.00	

YEAR	MAKE	MODEL	LICENS TAG NO	LUBE
96	Puic	Acadmaster wagon	DBR TEL	<input type="checkbox"/>
VIN	1G4BR02P1TR419817	ODOMETER	807217	CHANGE OIL
IN	DATE	OUT	DATE	FLUSH TRANS OIL
	02/04/16			<input type="checkbox"/>

DESCRIPTION OF WORK	AMOUNT
1 Replace inner & outer tie rod end on both side	
2 Install new idler arm & sway bar end links.	250.00
3 Align front end	39.95
4 Replace oil pan gasket set	300.00
5 CUSTOMER COMPLAINT/PROBLEM:	

Paid with M.C.

ADDITIONAL PARTS ON BACK

CHECK ONE	TOTAL PARTS	231.25
<input type="checkbox"/> ESTIMATE	SUBLET REPAIRS	
<input type="checkbox"/> INVOICE	TOTAL SUBLET REPAIRS	

TECHNICIAN SIGNATURE	CERT. #	INCLUDE IN ESTIMATE
X		\$

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I REQUEST A WRITTEN ESTIMATE.

I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$\_\_\_\_\_. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.

I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

LABOR CHARGES BASED ON:	ESTIMATED COST OF REPAIR	REVISED ESTIMATE	TOTAL LABOR
FLAT RATE <input type="checkbox"/>	\$ _____ X	\$ _____ X	589.95
HOURLY RATE <input type="checkbox"/>			
BOTH ABOVE <input type="checkbox"/>			
ESTIMATE/DIAGNOSTIC FEE:	FL BATT DISPOSAL \$ _____	FL TIRE DISPOSAL \$ _____	TOTAL PARTS 231.25
\$ _____ PER ABOVE	HAZARDOUS WASTE \$ _____	SHOP SUPPLIES \$ 8.00	SUBLET REPAIRS
\$ _____ /OR HOURLY AT	OTHER AUTHORIZED PERSON	ENVIRO CHARGE \$ 2.00	*** FEES 10.00
\$ _____ PER HOUR	DAILY CHARGE FOR STORAGE AFTER 3 WORKING DAYS AFTER CUSTOMER NOTIFIED \$ _____		ESTIMATE CHARGE
CHARGE FOR DISASSEMBLY AND/OR REASSEMBLY	ESTIMATE GOOD FOR 30 DAYS. I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the vehicle herein described for the purpose of testing and/or inspection. If there is a dispute over the final bill, the customer may bond the amount with your local clerk of the court, per FS 559.917. Failure to bond/pay the bill, may lead to implementation of FS 713.585; lien law. Repair shop will not be held responsible for loss or damage to the vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control. If it becomes necessary for you to employ a collection agency and/or an attorney to collect this account, I the undersigned agree to pay all court costs plus a reasonable attorney's fee.		GAS & OIL
WE CANNOT REASSEMBLE: <input type="checkbox"/>			SUB-TOTAL 831.20
SAVE OLD PARTS <input type="checkbox"/>			TAX 58.18
<input type="checkbox"/> YES <input type="checkbox"/> NO			TOTAL 889.38
(Core may apply)			

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A-N-C FL

# A.S. AUTOMOTIVE, INC.

025115

14088 S.W. 139 COURT  
 MIAMI, FL 33186  
 (305) 252-1107  
 MVR 94101788 MV-06912



Date: 06/13/16 Time:  
 Proposed Completion Date:

QUANTITY	PART NUMBER AND DESCRIPTION	U - USED N - NEW RC - RECONDITIONED RE - RESULT	RD - REDUCE PRICE BEARS NC - NO CHARGE UNDER WARRANTY	UNIT PRICE	EXTEND
	A/C Blower motor resistor module			199.80	
ADDITIONAL PARTS ON BACK					



### Intended Payment Method

CASH  CHECK  CREDIT CARD

#1  
 #2

DESCRIPTION	LABOR
LUBE	<input type="checkbox"/>
CHANGE OIL	<input type="checkbox"/>
FLUSH TRANS DIFF	<input type="checkbox"/>

YEAR: 09/96 MAKE: Buick Limited MODEL: wagon LICENSE TAG NO: SIXKA  
 VIN: 1G4BR8ZP1TR419817 ROADMASTER  
 IN DATE: 06/13/16 ODOMETER: 081167 OUT DATE: / / ODOMETER:

Paid MC 06/15/16

OPER #	DESCRIPTION OF WORK	LABOR
1	Check blower motor staying on. Blower fan module shorted.	45.00
2	Replace blower fan module, repair the damaged wire.	95.00
3		
4		
5	CUSTOMER COMPLAINT/PROBLEM:	

CHECK ONE	TOTAL PARTS →	199.80
<input type="checkbox"/> ESTIMATE	SUBLET REPAIRS	
<input type="checkbox"/> INVOICE	TOTAL SUBLET REPAIRS →	

month/ mile warranty on all parts and labor unless otherwise specified.  
 IF REPAIR COMMENCEMENT IS AUTHORIZED BUT COMPLETION IS NOT AUTHORIZED, A CHARGE WILL BE IMPOSED FOR DISASSEMBLY, REASSEMBLY OR PARTIALLY COMPLETED WORK.  
 TECHNICIAN SIGNATURE X CERT. #  INCLUDE IN ESTIMATE  \$

**PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:**  
 I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED \$100.  
 I REQUEST A WRITTEN ESTIMATE.  
 I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$\_\_\_\_\_. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.  
 I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

LABOR CHARGES BASED ON: FLAT RATE _____ HOURLY RATE _____ BOTH ABOVE _____ \$ _____ PER ABOVE ESTIMATE/DIAGNOSTIC FEE: \$ _____ /OR HOURLY AT \$ _____ PER HOUR CHARGE FOR DISASSEMBLY AND/OR REASSEMBLY \$ _____ WE CANNOT REASSEMBLE: <input type="checkbox"/> YES <input type="checkbox"/> NO (Core may apply)	ESTIMATED COST OF REPAIR \$ _____ X REVISED ESTIMATE \$ _____ X (**FS403.7185) FL BATT DISPOSAL \$ _____ (**FS403.718) FL TIRE DISPOSAL \$ _____ DAILY CHARGE FOR STORAGE AFTER 3 WORKING DAYS AFTER CUSTOMER NOTIFIED \$ _____ PER DAY ESTIMATE GOOD FOR 30 DAYS. I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the vehicle herein described for the purpose of testing and/or inspection. If there is a dispute over the final bill, the customer may bond the amount with your local clerk of the court, per FS 559.917. Failure to bond/pay the bill, may lead to implementation of FS 713.585; lien law. Repair shop will not be held responsible for loss or damage to the vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control. If it becomes necessary for you to employ a collection agency and/or an attorney to collect this account, I the undersigned agree to pay all court costs plus a reasonable attorney's fee. X	HAZARDOUS WASTE \$ _____ SHIP SUPPLIES \$ 5.00 ENVIRO CHARGE \$ _____ OTHER AUTHORIZED PERSON _____ PHONE _____	TOTAL LABOR 140.00 TOTAL PARTS 199.80 SUBLET REPAIRS *** FEES 5.00 ESTIMATE CHARGE GAS & OIL SUB-TOTAL 344.80 TAX 24.13 TOTAL 368.93
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The limited warranties applying to the parts listed hereon are those which may be offered by the manufacturer. We hereby expressly disclaim all warranties, either expressed or implied, including any implied warranties of merchantability or fitness for a particular purpose and neither assume, nor authorize any other person to assume for the company any liability in connection with the sale of this part(s) and/or service. Buyer shall not be entitled to recover from the company any consequential damages, to property, damages for loss of use, loss of time, loss of profits or income, or any other incidental damages.

A-N/C FL

# A.S. AUTOMOTIVE, INC.

14088 S.W. 139 COURT  
 MIAMI, FL 33186  
 (305) 252-1107  
 MVR 94101788 MV-06912



025143

Date: 02/17/16 Time: \_\_\_\_\_  
 Proposed Completion Date: \_\_\_\_\_

Intended Payment Method  
 CASH  CHECK  CREDIT CARD

PHONE #1 \_\_\_\_\_  
 #2 \_\_\_\_\_

QUANTITY	PART NUMBER AND DESCRIPTION	UNIT PRICE	EXTEND
	ABS sensor	105.00	

YEAR	MAKE	MODEL	LICENSE TAG NO
07	BUICK	ROADMASTER	SIXKA

IN DATE	ODOMETER	OUT DATE	ODOMETER
02/17/16	81210	/ /	

#	DESCRIPTION	LABOR
	LUBE	<input type="radio"/>
	CHANGE OIL	<input type="radio"/>
	FLUSH TRANS DIFF	<input type="radio"/>

Paid with me.

OPER #	DESCRIPTION OF WORK	LABOR
1	Replace ABS sensor on the right front	80.00
2		
3		
4		
5		

CUSTOMER COMPLAINT/PROBLEM: \_\_\_\_\_  
 \_\_\_\_\_ month/ \_\_\_\_\_ mile warranty  
 on all parts and labor unless otherwise specified.

TECHNICIAN SIGNATURE X CERT. # \_\_\_\_\_  
 ESTIMATED COST OF REPAIR \$ \_\_\_\_\_ X  
 REVISED ESTIMATE \$ \_\_\_\_\_ X

ESTIMATE	REVISIONS	TOTAL LABOR	TOTAL PARTS	SUBLET REPAIRS	*** FEES	ESTIMATE CHARGE	GAS & OIL	SUB-TOTAL	TAX	TOTAL
X		80.00	105.00		5.00			190.00	13.30	203.30

CHECK ONE  
 ESTIMATE  
 INVOICE

TOTAL PARTS → 105.00  
 TOTAL SUBLET REPAIRS →

**PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:**  
 I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED \$100.  
 I REQUEST A WRITTEN ESTIMATE.  
 I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$\_\_\_\_\_. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.  
 I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

LABOR CHARGES BASED ON:  
 FLAT RATE \_\_\_\_\_  
 HOURLY RATE \_\_\_\_\_  
 BOTH ABOVE \_\_\_\_\_  
 ESTIMATE/DIAGNOSTIC FEE: \$ \_\_\_\_\_  
 CHARGE FOR DISASSEMBLY AND/OR REASSEMBLY \$ \_\_\_\_\_  
 WE CANNOT REASSEMBLE: \_\_\_\_\_  
 SAVE OLD PARTS  YES  NO (Core may apply)

ESTIMATE GOOD FOR 30 DAYS. I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the vehicle herein described for the purpose of testing and/or inspection. If there is a dispute over the final bill, the customer may bond the amount with your local clerk of the court, per FS 559.917. Failure to bond/pay the bill, may lead to implementation of FS 713.585; lien law. Repair shop will not be held responsible for loss or damage to the vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control. If it becomes necessary for you to employ a collection agency and/or an attorney to collect this account, I the undersigned agree to pay all court costs plus a reasonable attorney's fee.

DATE \_\_\_\_\_

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# A.S. AUTOMOTIVE, INC.

14088 S.W. 139 COURT  
 MIAMI, FL 33186  
 (305) 252-1107  
 MVR 94101788 MV 06919



025261

QUANTITY	PART NUMBER AND DESCRIPTION	UNIT PRICE	EXTEND
	Battery 78B towing	128.00	
		65.00	
Paid with M.C.			



Date: 07/25/16 Time:  
 Proposed Completion Date:

Intended Payment Method

CASH  CHECK  CREDIT CARD

P #1  
 P #2

#	DESCRIPTION	LABOR
	LUBE	<input type="checkbox"/>
	CHANGE OIL	<input type="checkbox"/>
	FLUSH TRANS. DIFF.	<input type="checkbox"/>

YEAR: 96 MAKE: Buick MODEL: Roadmaster LICENSE TAG NO.: SIXKA  
 VIN: 1G4BR28ZP1TR419817  
 IN DATE: 07/25/16 ODOMETER: 81344 OUT DATE: / / ODOMETER: / /

DESCRIPTION OF WORK	LABOR
1 Check for not starting. Battery shorted.	
2 Replace battery. check charging system	49.95
3	
4	
5	

month/ mile warranty on all parts and labor unless otherwise specified.  
 TECHNICIAN SIGNATURE: X CERT. #  
 INCLUDE IN ESTIMATE \$

CHECK ONE	TOTAL PARTS → 193.00
<input type="checkbox"/> ESTIMATE	SUBLET REPAIRS
<input type="checkbox"/> INVOICE	TOTAL SUBLET REPAIRS →

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 I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED \$100.  
 I REQUEST A WRITTEN ESTIMATE.  
 I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$ . THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.  
 I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

LABOR CHARGES BASED ON:	ESTIMATED COST OF REPAIR	REVISED ESTIMATE	TOTAL LABOR
FLAT RATE _____	\$ X	\$	49.95
HOURLY RATE _____			TOTAL PARTS
BOTH ABOVE _____			193.00
ESTIMATE/DIAGNOSTIC FEE: \$ _____/OR HOURLY AT \$ _____ PER HOUR	FL BATT DISPOSAL (**FS403.7185) \$ 2.00	* THIS CHARGE REPRESENTS COSTS AND PROFITS TO THE MOTOR VEHICLE REPAIR FACILITY FOR MISCELLANEOUS SHOP SUPPLIES OR WASTE DISPOSAL. **FS403.718 MANDATES A \$1.00 FEE FOR EACH NEW TIRE SOLD IN THE STATE OF FLORIDA. ***FS403.7185 MANDATES A \$1.50 FEE FOR EACH NEW OR REMANUFACTURED BATTERY SOLD IN THE STATE OF FLORIDA.	SUBLET REPAIRS
CHARGE FOR DISASSEMBLY AND/OR REASSEMBLY \$ _____	FL TIRE DISPOSAL (**FS403.718) \$	* HAZARDOUS WASTE \$	*** FEES
WE CANNOT REASSEMBLE: _____	DAILY CHARGE FOR STORAGE AFTER 3 WORKING DAYS AFTER CUSTOMER NOTIFIED \$ PER DAY	* SHOP SUPPLIES \$ 3.00	5.00
SAVE OLD PARTS <input type="checkbox"/> YES <input type="checkbox"/> NO (Core may apply)	ESTIMATE GOOD FOR 30 DAYS. I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the vehicle herein described for the purpose of testing and/or inspection. If there is a dispute over the final bill, the customer may bond the amount with your local clerk of the court, per FS 559.917. Failure to bond/pay the bill, may lead to implementation of FS 713.585; lien law. Repair shop will not be held responsible for loss or damage to the vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control. If it becomes necessary for you to employ a collection agency and/or an attorney to collect this account, I the undersigned agree to pay all court costs plus a reasonable attorney's fee.	* ENVIRO CHARGE \$	ESTIMATE CHARGE
			GAS & OIL
			SUB-TOTAL
			247.95
			TAX
			17.35
			TOTAL
			265.30

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